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APPLICANTS

Jonathan R. Hughes, Malvern, UNITED KINGDOM;

Richard J. Miller, Malvern, UNITED KINGDOM;

** CONTINUING DATA ***** *None JD.*** FOREIGN APPLICATIONS ***** *Tes JP*
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Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS

23117
 NIXON & VANDERHYE, PC
 1100 N GLEBE ROAD
 8TH FLOOR
 ARLINGTON, VA
 22201-4714

TITLE

Spatial light modulator imaging systems

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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